

Client Satisfaction Survey

In order to meet your investment needs and to enhance the quality and effectiveness of our products and services, we have integrated the use of a survey into our practice. This brief survey allows us to gain insight into the strengths of our practice, as well as to pinpoint areas for improvement. Our goal is to continue to offer you the best possible product selection and the highest levels of customer service. As our valued client, we sincerely appreciate you taking a few minutes to complete this survey.

Overall Satisfaction

1. How would you rate the following aspects of our practice?

Ability to meet your financial needs and objectives	Excellent	Good	Adequate	Poor	NA
Quality of our investment products and services	Excellent	Good	Adequate	Poor	NA
Level of our customer service	Excellent	Good	Adequate	Poor	NA
Ability to communicate clearly and effectively	Excellent	Good	Adequate	Poor	NA
Professionalism of our staff members	Excellent	Good	Adequate	Poor	NA

Financial Needs

2. How would you rate our effectiveness in meeting your financial needs and goals?

Taking the time to understand your financial needs	Excellent	Good	Adequate	Poor	NA
Evaluating your risk tolerance, investment time horizon and other investment concerns	Excellent	Good	Adequate	Poor	NA
Working with you to set appropriate financial goals	Excellent	Good	Adequate	Poor	NA
Providing you with products and services that meet your needs and can help you achieve your goals	Excellent	Good	Adequate	Poor	NA

3. What are the most challenging financial concerns you currently face and how well are we addressing them?

4. Are there financial concerns, issues or events that we have not yet addressed?

☐ Yes ☐ No If yes, what are they and how can we help?

Investments

5. How would you rate your satisfaction with the investments recommended by our practice?

Performance of your investments	Excellent	Good	Adequate	Poor	NA
Level of risk associated with your investments	Excellent	Good	Adequate	Poor	NA
Understanding of the investments you own	Excellent	Good	Adequate	Poor	NA
Effectiveness of the features or benefits offered in your investment	Excellent	Good	Adequate	Poor	NA

6. Which investments in your portfolio have met or exceeded your expectations?

7. Are there any investments in your portfolio with which you are unhappy?

☐ Yes ☐ No If yes, what are they and why are you not satisfied?

9. How frequently would you like to be contacted by our practice?

☐ Monthly ☐ Quarterly ☐ Semiannually ☐ Annually

10. With what method would you prefer that we communicate with you?

☐ Phone ☐ Email ☐ Face-to-face ☐ Other:

Staff

11. How would you rate the quality of service of our staff?

General courtesy of staff members	Excellent	Good	Adequate	Poor	NA
General staff knowledge	Excellent	Good	Adequate	Poor	NA
Proper phone etiquette	Excellent	Good	Adequate	Poor	NA
Promptness in dealing with any issues or concerns	Excellent	Good	Adequate	Poor	NA
Ability to handle questions or requests	Excellent	Good	Adequate	Poor	NA
Overall service rating	Excellent	Good	Adequate	Poor	NA

Closing Comments

12. Based on our performance, how likely is it that you will refer our practice to family and friends?

☐ Certain ☐ Very likely ☐ Somewhat likely ☐ Unlikely ☐ Will not refer

13. We would appreciate any additional suggestions regarding how we could improve our products and services. Thank you again for your time